Recipient Committee

Date Stamp COVER PAGE

Campaign Statement Cover Page			CITY CLERK FORM 460
	Statement covers period from July 1, 2016	Date of election if applicable: (Month, Day, Year)	17 J&N 3 PM 2: 22 For Official Use Only
SEE INSTRUCTIONS ON REVERSE	through December 31, 2016	016	
1. Type of Recipient Committee: All Committees - Complete Parts 1, 2,	s - Complete Parts 1, 2, 3, and 4.	2. Type of Statement:	
✓ Officeholder, Candidate Controlled Committee ○ State Candidate Election Committee ○ Recall (Also Camplete Part 5)	Primarily Formed Ballot Measure Committee Controlled Sponsored	Preelection Statement Semi-annual Statement Termination Statement (Also file a Form 410 Termination)	Quarterly Statement Special Odd-Year Report termination)
General Purpose Committee () Sponsored	Primarily Formed Candidate/	Amendment (Explain below)	pelow)
Small Contributor Committee Political Party/Central Committee	Officeholder Committee (Also Complete Part 7)		
3. Committee Information	I.D. NUMBER 1245246	Treasurer(s)	
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)	EE)	NAME OF TREASURER	
Karen Spiegel for Corona City Council		MAILING ADDRESS	
STREET ADDRESS (NO P.O. BOX) 1800 South Main Street		CITY	STATE ZIP CODE AREA CODE/PHONE
CITY STATE	ZIP CODE AREA CODE/PHONE	NAME OF ASSISTANT TREASURER, IF ANY	ER, IF ANY
Corona CA	9282 951-833-8136		
MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX	вох	MÁILING ADDRESS	
P.O. Box 1837			
IFI		<u> </u>	STATE ZIP CODE AREA CODE/PHONE
CA	92878 951-833-8136		
OPTIONAL: FAX / E-MAIL ADDRESS		OPTIONAL: FAX / E-MAIL ADDRESS	SS
spiegel18@aot.com			

4. Verification

I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. It certify under penalty of perjury under the laws of the State of California that the foregoing is true, and correct.

Executed on	Executed on Date	Executed on January 30, 2017	Executed on January 30, 2017
BySignature of Controlling Officeholder, Candidate, State Measure Proponent	BySignature of Controlling Officeholder, Candidate, State Measure Proponent	By Signature of Controlling Officeholder, Candillate, State Wassure Proponent or Responsible Officer of Sponsor	By King Signature of Treasurer Assistant Treasurer

Recipient Committee Campaign Statement Cover Page — Part 2



NAME COMMI		(Riverside	4201	NAME O	COMMI	Relat not inc contrit	1800	Coro	Kare	5. Offic	
NAME OF TREASURER COMMITTEE ADDRESS STREET			Riverside	venue	Karen Spiegel for Supervisor 2018 NAME OF TREASURER Richard Teaman	COMMITTEE NAME	Related Committees Not Included in this Statement: List any committees not included in this statement that are controlled by you or are primarily formed to receive contributions or make expenditures on behalf of your candidacy.	1800 South Main Street	OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE) Corona City Council	NAME OF OFFICEHOLDER OR CANDIDATE Karen Spiegel	Officeholder or Candidate Controlled Committee	
STREET ADDRESS (NO P.O. BOX)			CA STATE	(NO	018		aded in this controlled by yo behalf of your	(NO. AND STREET)	CATION AND DIS	m	ntrolled Co.	
-11	CONTROL		92501		1384828 CONTROLLE ZI YES	I.D. NUMBER	Statement: ou or are prima candidacy.	Corona	TRICT NUMBÉR		mmittee	
	YES NO		941/274-9500	1 1	1384828 CONTROLLED COMMITTEE? Yes	BER	List any committees rily formed to receive	STATE ZIP CA 92882	IF APPLICABLE)			
	NAM	NAM	NAM	NAM	7. Prir	1	OFF	NAM	BALL	NAME NAME	6. Prin	
	NAME OF OFFICEHOLDER OR CANDIDATE	Primarily Formed Candidate/Officeholder Committee List names of officeholder(s) or candidate(s) for which this committee is primarily formed.		OFFICE SOUGHT OR HELD	Identify the controlling officeholder, candidate, or s	BALLOT NO. OR LETTER	NAME OF BALLOT MEASURE	Primarily Formed Ballot				
					date/Officeh or which this co			Illing officeholder, candidate, or state measure proponent, if any.	JURISDICTION		ed Ballot Measure Committee	
	OFFICE SOUGHT OR HELD	nolder Comr	-	Dis	te, or state me			ommittee				
	T OR HELD	T OR HELD	T OR HELD	T OR HELD	nittee List na		DISTRICT NO. IF ANY	asure propone	0 St			9
	SUPPORT OPPOSE	SUPPORT OPPOSE	SUPPORT OPPOSE	SUPPORT OPPOSE	ames of		44	nt, if any.	SUPPORT OPPOSE			

Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

SUMMARY PAGE

Summary Page	to whom condition	State	Statement covers period January 1, 2016	CALIFORNIA 460
SEE INSTRUCTIONS ON REVERSE		through_	June 30, 2016	Page 3 of 10
NAME OF FILER Karen Spiegel for Corona City Council				1.D. NUMBER 1245246
Contributions Received	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	COlumn B CALENDAR YEAR TOTAL TO DATE	Calendar Year Sum Running in Both th	Calendar Year Summary for Candidates Running in Both the State Primary and
1. Monetary Contributions		0 0	20. Contributions Received 21. Expenditures Made \$	1/1 through 6/30 7/1 to Date
Expenditures Wade 6. Payments Made	\$ 6,305.27 \$	6,305. <u>27</u>	Expenditure Limit S Candidates	Limit Summary for State
SUBTOTAL CASH PAYMENTS	\$ 6,305.27 \$ 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	6,305.27 0 0 6,305.27	22. Cumulative (if Subject to Date of Election (mm/dd/yy)	Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit) lection Total to Date diyy)
Current Cash Statement 12. Beginning Cash Balance Previous Summary Page, Line 16 13. Cash Receipts Column A, Line 3 above 14. Miscellaneous Increases to Cash Schedule I, Line 4 15. Cash Payments Column A, Line 8 above 16. ENDING CASH BALANCE Column A, Line 8 above 16. ENDING CASH BALANCE Column A, Line 8 above 17. Cash Payments Column A, Line 8 above 18. ENDING CASH BALANCE Column A, Line 8 above 19. ENDING CASH BALANCE Column A, Line 8 above 19. ENDING CASH BALANCE Column A, Line 8 above 19. ENDING CASH BALANCE Column A, Line 8 above 19. ENDING CASH BALANCE Column A, Line 8 above 19. ENDING CASH BALANCE Column A, Line 8 above 19. ENDING CASH BALANCE Column A, Line 8 above 19. ENDING CASH BALANCE Column A, Line 8 above 19. ENDING CASH BALANCE Column A, Line 8 above 19. ENDING CASH BALANCE Column A, Line 8 above 19. ENDING CASH BALANCE Column A, Line 8 above 19. ENDING CASH BALANCE Column A, Line 8 above 19. ENDING CASH BALANCE Column A, Line 8 above 19. ENDING CASH BALANCE Column A, Line 8 above 19. ENDING CASH BALANCE Column A, Line 8 above 19. ENDING CASH BALANCE Column A, Line 8 above 19. ENDING CASH BALANCE Column A, Line 8 above 19. ENDING CASH BALANCE Column A, Line 8 above 19. ENDING CASH BALANCE Column A, Line 8 above 19. ENDING CASH BALANCE COLUMN A, Line 8 above 19. ENDING CASH BALANCE COLUMN A, Line 8 above 19. ENDING CASH BALANCE COLUMN A, Line 8 above 19. ENDING CASH BALANCE COLUMN A, Line 8 above 19. ENDING CASH BALANCE COLUMN A, Line 8 above 19. ENDING CASH BALANCE COLUMN A, Line 8 above 19. ENDING CASH BALANCE COLUMN A, Line 8 above 19. ENDING CASH BALANCE COLUMN A, Line 8 above 19. ENDING CASH BALANCE COLUMN A, Line 8 above 19. ENDING CASH BALANCE COLUMN A, Line 8 above 19. ENDING CASH BALANCE COLUMN A, Line 8 above 19. ENDING CASH BALANCE COLUMN A, Line 8 above 19. ENDING CASH BALANCE COLUMN A, Line 8 above 19. ENDING CASH BALANCE COLUMN A, Line 8 above 19. ENDING CASH BALANCE COLUMN A, Line 8 above 19. ENDING CASH BALANCE COLUMN A, Line 8 above 19. E	\$ 20,354.20 To a add A it a am of y and be a shoper	To calculate Column B, add amounts in Column A to the corresponding amounts from Column B of your last report. Some amounts in Column A may be negative figures that should be subtracted from previous period amounts. If	*Amounts in this section n reported in Column B.	*Amounts in this section may be different from amounts reported in Column B.
77 1 —		filed for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).		
19. Outstanding Debts Add Line 2 + Line 9 in Column B above	\$		FPPC Advice: advi	FPPC Form 460 (Jan/2016) FPPC Advice: advice@fppc.ca.gov (866/275-3772)

Schedule E

Amounts may be rounded

SCHEDULE

6,305.27	TOTAL \$		iry Page, Column	the Summa	nd 3. Enter here and on	4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)
0	69		(e).)	1, Column	nt from Schedule B, Parl	3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)
89.44	\$		医皮肤结肠管 化二硫酚 经表际资金 医皮皮病 医皮肤病 医皮肤病		0	2. Unitemized payments made this period of under \$100
6,215.83	()		1	4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	hedule E subtotals.)	1. Itemized payments made this period. (Include all Schedule E subtotals.)
						Schedule E Summary
436.00	SUBTOTAL \$	BNS		dule D.	also be summarized on Sche	* Payments that are contributions or independent expenditures must also be summarized on Schedule D
236.00			Donation	cvc		Fire & Burn Foundation/CFA 815 W Sixth Street Corona, CA 92882
50.00			Donation	cvc		Secretary of State Sacramento, CA
150.00				MTG		Greater Hispanic Chamber of Commerce 119 E 4th St. Corona, CA 92879
AMOUNT PAID		DESCRIPTION OF PAYMENT		CODE OR		NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER LD. NUMBER)
candidate/sponsor	osts ction costs meals id meals of the same of	Otherwise, describe the payment. RAD radio airlime and production costs RFD returned contributions SAL campaign workers' salaries TEL t.v. or cable airlime and production costs TRC candidate travel, lodging, and meals TRS staff/spouse travel, lodging, and meals TSF transfer between committees of the same candidate/sponsor VOT voter registration WEB information technology costs (internet, e-mail)	ayment, you may enter the code. Other member communications meetings and appearances office expenses petition circulating phone banks polling and survey research postage, delivery and messenger services professional services (legal, accounting) print ads	ayment, you may enter the code member communications meetings and appearances office expenses petition circulating phone banks polling and survey research postage, delivery and messenger service professional services (legal, accounting) print ads	cribes the p MBR MTG OFC PET PHO POL POS PRO PRO PRT	CODES: If one of the following codes accurately describes CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events IND independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings
	1245246					Karen Spiegel for Corona City Council
ER	I.D. NUMBER					NAME OF FILER
4 of 10	Page 4	through June 30, 2016				SEE INSTRUCTIONS ON REVERSE
å	CALIFORNIA	Statement covers period from January 1, 2016		llars,	to whole dollars,	Payments Made

Schedule E Payments Made (Continuation Sheet)

NAME OF FILER

Karen Spiegel for Corona City Council

SEE INSTRUCTIONS ON REVERSE

Amounts may be rounded to whole dollars.

Statement covers period

SCHEDULE E (CONT.)

through June 30, 2016 January 1, 2016 CALLEGE 460 Page 5 1245246 1.D. NUMBER of. 10

1,954.25	SUBTOTAL \$	dule D.	* Payments that are contributions or independent expenditures must also be summarized on Schedule D
160.00	Donation	CVC	Meals on Wheels 4845 Brockton Ave. Riverside, CA 92506
160.00	Donation	cvc	RCCD Foundation 4800 Magnolia Ave. Riverside, CA 92506
162.00	Donation, Member Dues	cvc	Woman's Improvement Club 1101 S Main St. Corona, CA 92882
74.08	Office Supplies/Copies	OFC	Office Depot 1160 El Camino Ave Corona, CA 92879
1,398.17	Fundraising Commission	FND	The Michael Williams Company 3711-A Arlington Avenue Riverside, CA 92506
AMOUNT PAID	OR DESCRIPTION OF PAYMENT	CODE O	NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)
candidate/sponsor	ayment, you may enter the code. Otherwise, describe the payment. RAD radio airlime and production costs meetings and appearances office expenses SAL campaign workers' salaries petition circulating FEC candidate travel, lodging, and meats polling and survey research professional services (legal, accounting) professional services (legal, accounting) print ads RED returned contributions SAL campaign workers' salaries TEL t.v. or cable airlime and production costs TRC candidate travel, lodging, and meats transfer between committees of the same candidate/sponsor voter registration WEB information technology costs (internet, e-mail)	ayment, you may enter the cod member communications meetings and appearances office expenses petition circulating phone banks polling and survey research postage, delivery and messenger service professional services (legal, accounting) print ads	CMP campaign paraphemalia/misc. CMS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND independent expenditure supporting/opposing others (explain)* LEG legal defense LTT campaign filterature and mallings CMS campaign paraphemalia/misc. MBR member communications MFD radio airtime and production office expenses SAL campaign workers' salaries CAL candidate filing/ballot fees FET petition circulating PHO phone banks POL polling and survey research TRS staff/spouse travel, lodging, a TRS staff/spouse travel, lodging, a TRS staff/spouse travel, lodging and survey research registration TRS staff/spouse travel, lodging in transfer between committee TRS staff/spouse travel, lodging in the services in the payment. PRO professional services (legat, accounting) WEB information technology cos

Payments Made Schedule E (Continuation Sheet)

SEE INSTRUCTIONS ON REVERSE

Karen Spiegel for Corona City Council

Amounts may be rounded to whole dollars.

SCHEDULE & (CONT.)

through June 30, 2016 Statement covers period January 1, 2016 CALIFORNIA 1245246 Page 6 LD. NUMBER 9 7

1,206.37	\$UBTOTAL \$	dule D.	* Payments that are contributions or independent expenditures must also be summarized on Schedule D.
50.00	Donation	CVC	Kiwanis Club of Corona P.O. Box 7490 Norco, CA 92860
678.98	Office Supplies, Computer, Printer, Ink	CVC OI	Costco 480 N McKinley St. Corona, CA 92879
45.44	Corona Senior Center - Lunch & Learn	cvc c	99 Cent Store 725 S Main Street Corona, CA 92879
400.00	Donation	CVC Do	Corona Public Library Foundation 650 S Main Street Corona, CA 92882
31.95	Postage	FND	United States Postal Service 414 W Grand Blvd, Corona, CA 92878
AMOUNT PAID	DESCRIPTION OF PAYMENT	CODE OR	NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER LD, NUMBER)
candidate/sponsor	he code. Otherwise, describe the payment. RAD radio airtime and production costs RFD returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and production costs TRC candidate travel, lodging, and meals TRS staff/spouse travel, lodging, and meals TRS staff/spouse travel, lodging, and meals TSF transfer between committees of the same candidate/sponsor voter registration WEB information technology costs (internet, e-mail)	ayment, you may enter the code. member communications meetings and appearances office expenses petition circulating phone banks polling and survey research postage, delivery and messenger services professional services (legal, accounting) print ads	CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, CMP campaign paraphernalia/misc. CNS campaign consultants CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events IND independent expenditure supporting/opposing others (explain)* IND independent expenditure supporting/opposing others (explain)* IND independent expenditure supporting/opposing others (explain)* PNO postage, delivery and messenger services PRO professional services (legal, accounting) VOT Campaign fiterature and mailings PRO print ads

Payments Made Schedule E (Continuation Sheet)

NAME OF FILER

Karen Spiegel for Corona City Council

SEE INSTRUCTIONS ON REVERSE

Amounts may be rounded to whole dollars.

CALIFORN SCHEDULE E (CONT.)

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Statement covers period January 1, 2016

through

June 30, 2016

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245246 I.D. NUMBER Page_

LEG PAR CVC CNS * Payments that are contributions or independent expenditures must also be summarized on Schedule D. CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment Corona, CA 92880 Corona Fire Safety Foundation Corona, CA 92878 P.O. Box 281 Day of the Child Eastvale, CA 91752 Eastvale Community Foundation Corona, CA **AYHD** Foundation Riverside, CA 92507 2724 Gateway Dr. Registrar of Voters 735 Public Safety Way 12363 Limonite Avenue, Suite 910 civic donations contribution (explain nonmonetary)* campaign consultants campaign paraphernalia/misc campaign literature and mailings independent expenditure supporting/opposing others (explain) legal defense fundraising events candidate filing/ballot lees NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER LD. NUMBER) PET OFFICE POS member communications meetings and appearances office expenses professional services (legal, accounting) postage, delivery and messenger services polling and survey research phone banks petition circulating CODE CVC CVC CVC CVC 드 유 Copies Donations Donation Donation Donation DESCRIPTION OF PAYMENT REPERSONAL SERVICE SER TRS VOT WEB voter registration information technology costs (internet, e-mail) transfer between committees of the same candidate/sponsor t.v. or cable airlime and production costs staff/spouse travel, lodging, and meals candidate travel, lodging, and meals campaign workers' salaries returned contributions radio airlime and production costs SUBTOTAL \$ AMOUNT PAID 797.80 250.00 310.00 100.00 100.00 37.80

Payments Made Schedule E (Continuation Sheet)

NAME OF FILER

Karen Spiegel for Corona City Council

Amounts may be rounded to whole dollars.

from January 1, 2016 Statement covers period

SCHEDULE E (CONT.)

through June 30, 2016 1245246 Page __ I.D. NUMBER œ 9

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* Payments that are contributions or independent expenditures must also be summarized on Schedule D.	Circle City Kiwanis P.O. Box 78146 Corona, CA 92877	Kids Rock Free 815 W Sixth Street Corona, CA 92882	Dollar Storage 205 N Lincoln Corona, CA 92882	United States Postmaster 420 E Grand Blvd. Corona, CA 92878	Norco Area Chamber of Commerce 3954 Old Hamner Ave Norco, CA 92860	NAME AND ADDRESS OF PAYER (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CYC civic donations FIL candidate filing/ballot fees FND independent expenditure supporting/opposing others (explain)* FND legal defense LEG legal defense LEG campaign paraphernalia/misc. MBR member communications MRR member communications MRR member communications MRR member communications AND meetings and appearances OFC office expenses PET petition circulating PHO phone banks POL polling and survey research Independent expenditure supporting/opposing others (explain)* PRO postage, delivery and messenger services PRO professional services (legal, accounting) NEB information technology cos
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BUS	Donations	Donation	Storage	Post Office Box	Meeting	R DESCRIPTION OF PAYMENT	er the code. Otherwise, describe the payment. RAD radio airtime and production costs RFD returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and production costs TRC candidate travel, lodging, and meals TRS staff/spouse travel, lodging, and meals TRS transfer between committees of the same candidate/sponsor voter registration VOT voter registration WEB information technology costs (internet, e-mail)
SUBTOTAL \$							sts tion costs neals d meals f the same
1,047.10	100.00	100.00	643.10	134,00	70.00	AMOUNT PAID	candidate/sponsor

Schedule E

Amounts may be rounded

SCHEDULE E (CONT.)

Statement covers period

100					
699.78	\$ SUBTOTAL		chedule D.	Payments that are contributions or independent expenditures must also be summarized on Schedule D.	* Payme
107.28	100 Women Who Care	Food Donation -	cvc	Vons 369 Magnolia Ave Corona, CA 92879	Vons 369 M
120.00		Donation	cvc	Corona Rotary Corona, CA	Corona Rot Corona, CA
50.00		Donation	cvc	American Diabetes Association 2060 Chicago Ave Riverside, CA 92507	Americ 2060 (Rivers
230.00		Donation	CVC	American Cancer Society 6355 Riverside Ave. Riverside, CA	Americ 6355 F Rivers
192.50		Donation, Dues	cvc	Soroptimist International of Corona P.O. Box 381 Corona, CA 92828	Soropt P.O. B Corona
AMOUNT PAID	DESCRIPTION OF PAYMENT	OR DES	CODE	NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER LD. NUMBER)	
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	1245246			Karen Spiegel for Corona City Council	Karei
7	I.D. NUMBER			FFILER	NAME OF FILER
of 10	through June 30, 2016 Page 9			SEE INSTRUCTIONS ON REVERSE	SEE INST
460	statement covers period from January 1, 2016		dollars.	(Continuation Sheet) to whole dollars. Payments Made	(Con Payn

Schedule E Payments Made (Continuation Sheet)

NAME OF FILER

SCHEDULE E (CONT.)

SEE INSTRUCTIONS ON REVERSE CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. Karen Spiegel for Corona City Council Amounts may be rounded to whole dollars. from January 1, 2016 through_ Statement covers period June 30, 2016 CALIFORNIA FORM 1245246 Page 10 I.D. NUMBER 9, 460 10

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* Payments that are contributions or independent expenditures must also be summarized on Scheduje D.				Kings Fish House	NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER 1.). NUMBER)	campaign paraphernalia/misc. campaign consultants contribution (explain nonmonetary)* civic donations candidate filing/ballot fees fundraising events independent expenditure supporting/opposing others (explain)* legal defense legal defense legal defense legal defense
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SUBTOTAL \$				n Board	YMENT	radio airtime and production costs returned contributions campaign workers' salaries t.v. or cable airtime and production costs candidate travel, lodging, and meals staff/spouse travel, lodging, and meals transfer between committees of the same candidate/sponsor voter registration information technology costs (internet, e-mail)
74.53			NI.	74.53	AMOUNT PAID	candidate/sponsor